## Name:

## **Health Interventions I Use**

Part of Body or Condition	Non-Prescription Medicines	Herbs	Vitamins and Minerals	Special Foods	Other approaches
General health					
For energy					
Pain relief					
Sleeping					
Mood					
Staying awake					
Scalp/hair					
Skin					
Headaches					
Eyes					
Ears					
Nose					
Throat					
Colds/Allergies					
Coughs					
Sinuses					
Bones					
Mouth					
Stomach/digestion					
Constipation					
Diarrhea					
Sexual health					
Arthritis					
Weight control					
Urine, bladder					
Hemorrhoids					
Odor					
Feet					